



STAFF SELECTION COMMISSION
BLOCK NO. 12, CGO-COMPLEX, LODHI ROAD, NEW DELHI
110003
COMBINED HIGHER SECONDARY (10+2) LEVEL
EXAMINATION, 2022
REGISTRATION NO: 50005790109



Himanshu

APPLICATION IS INCOMPLETE

| | | | |
|--|---|---|------------------|
| 1. NAME AS PER MATRICULATION | 2. NEW/ CHANGED NA | 3. FATHER'S NAME | 4. MOTHER'S NAME |
| HIMANSHU TIWARI | - | SARWDA NAND TIWARI | ARCHANA TIWARI |
| 5. DATE OF BIRTH (DD/MM/YYYY) | 6. AGE AS ON 01/01/2022 | 7. GENDER | 8. CATEGORY |
| 10/08/2002 | 19.4 | MALE | EWS |
| 9. WHETHER PERSON WITH DISABILITY (PwBD) ? | | 9.1 IF YES, TYPE OF DISABILITY (OH, HH,VH, OTHERS) | |
| NO | | - | |
| 10. NATIONALITY | | 11. MARK OF VISIBLE IDENTIFICATION | |
| CITIZEN OF INDIA | | MARK BELOW RIGHT EYE | |
| 12. MATRICULATION (10th CLASS) EXAMINATION BOARD | 13. MATRICULATION (10th CLASS) ROLL NO | 14. MATRICULATION (10th CLASS) YEAR OF PASSING | |
| CENTRAL BOARD OF SECONDARY EDUCATION (CBSE) | 1264964 | 2018 | |
| 15. PREFERENCE OF EXAMINATION CENTERS | | | |
| EXAMINATION CENTRE (FIRST PREFERENCE) | EXAMINATION CENTRE (SECOND PREFERENCE) | EXAMINATION CENTRE (THIRD PREFERENCE) | |
| SATNA (6014) | JABALPUR (6007) | BHOPAL (6001) | |
| 16. MEDIUM FOR TYPING TEST: | 17. WHETHER 12TH STANDARD PASS IN SCIENCE STREAM WITH MATHEMATICS AS A SUBJECT FROM A RECOGNIZED BOARD OR EQUIVALENT (FOR C&AG AS DATA ENTRY OPERATOR): | | |
| ENGLISH | YES | | |
| 18.1. WHETHER YOU ARE AN EX-SERVICEMAN (ESM) OR SERVING IN THE ARMED FORCES? | 18.2. DATE OF JOINING THE ARMED FORCES (DD/MM/YYYY) | 18.3. DATE OF DISCHARGE/ LIKELY DATE OF DISCHARGE FROM ARMED FORCES (DD/MM/ YYYY) | |
| NO | - | - | |

| | | | | | | |
|---|--------------|---|---------------------------|---|------------------|------|
| 18.4. LENGTH OF SERVICE IN THE ARMED FORCES | | 18.5. HAVE YOU ALREADY JOINED A CIVIL POST BY AVAILING BENEFIT OF RESERVATION FOR EX-SERVICEMAN (ESM) ? | | 18.6. DATE OF JOINING TO CIVIL POST (DD/MM/YYYY) | | |
| - | | - | | - | | |
| 19.1.ARE YOU A PERSON WITH BENCHMARK DISABILITIES (i.e. 40% OR MORE) IN THE CATEGORY OF BLINDNESS, BOTH ARMS AFFECTED- BA AND/ OR CEREBRAL PALSY ? | | | | | | |
| - | | | | | | |
| 19.2. DO YOU HAVE A PHYSICAL LIMITATION TO WRITE AND SCRIBE IS REQUIRED TO WRITE ON YOUR BEHALF (CERTIFICATE TO THIS EFFECT FROM THE CHIEF MEDICAL OFFICER/ CIVIL SURGEON & MEDICAL SUPERINTENDENT OF A GOVERNMENT HEALTH CARE INSTITUTION AS PER NOTICE OF THE EXAMINATION WOULD BE REQUIRED AT THE TIME OF EXAMINATION) ? | | | | | | |
| - | | | | | | |
| 19.3. WHETHER SCRIBE IS REQUIRED ? | | 19.4. WILL YOU MAKE YOUR OWN ARRANGEMENT OF SCRIBE ? | | 19.5. IF SCRIBE IS TO BE ARRANGED BY SSC, INDICATE MEDIUM | | |
| - | | - | | - | | |
| 20.1. WHETHER SEEKING AGE RELAXATION ? | | | | 20.2. IF YES, AGE RELAXATION CODE | | |
| NO | | | | - | | |
| 21. HIGHEST EDUCATIONAL QUALIFICATION | | | | | | |
| INTERMEDIATE/ HIGHER SECONDARY/ 10+2 (2) | | | | | | |
| 22. DETAILS OF QUALIFYING EDUCATIONAL QUALIFICATION | | | | | | |
| 12TH STANDARD | | | | | | |
| STATUS | PASSING YEAR | STATE/ UT OF BOARD/ UNIVERSITY | NAME OF BOARD/ UNIVERSITY | ROLL NO | PERCENTAGE | CGPA |
| PASSED | 2020 | MADHYA PRADESH | OTHERS | 19648636 | 80 | - |
| 23. DO YOU WANT TO MAKE AVAILABLE YOUR PERSONAL INFORMATION FOR ACCESSING JOB OPPORTUNITY IN TERMS OF DoP&T'S O.M NO.39020/1/2016-ESTT.(B) DATED 21.06.2016 ? | | | | | | |
| NO | | | | | | |
| ADDRESS DETAIL | | | | | | |
| 24. CORRESPONDENCE ADDRESS | | | | 25. PERMANENT ADDRESS | | |
| NEAR JANTA COLLEGE WARD NO 10 ANATPUR REWA | | | | NEAR JANTA COLLEGE WARD NO 10 ANATPUR REWA | | |
| DISTRICT: REWA | | | | DISTRICT:REWA | | |
| STATE: MADHYA PRADESH | | | | STATE: MADHYA PRADESH | | |
| PIN : 486001 | | | | PIN : 486001 | | |
| MOBILE NO: 8305757536 | | | | EMAIL: 000himanshu2002@gmail.com | | |
| 27. WHETHER THE PHOTOGRAPH HAS BEEN TAKEN ON OR AFTER 06-SEPTEMBER-2022? | | | | | | |
| YES | | | | | | |
| FEE PAYMENT | AMOUNT | | TRANSACTION NO | | TRANSACTION DATE | |
| NOT EXEMPTED | 100 | | - | | - | |

DECLARATION

1. I HAVE READ THE NOTICE OF THE EXAMINATION AND ACCEPT ALL THE TERMS & CONDITIONS OF THE NOTICE OF THE EXAMINATION.

2. I HEREBY DECLARE THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE TRUE, COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT IN THE EVENT OF ANY INFORMATION BEING FOUND SUPPRESSED/FALSE OR INCORRECT OR INELIGIBILITY BEING DETECTED BEFORE OR AFTER THE EXAMINATION, MY CANDIDATURE/ APPOINTMENT IS LIABLE TO BE CANCELLED. I AM WILLING TO SERVE ANYWHERE IN INDIA.

3. I DECLARE THAT THE PHOTOGRAPH UPLOADED IN THE APPLICATION FORM HAS BEEN TAKEN ON OR AFTER THE STIPULATED DATED.

4. I AGREE TO AUTHORIZE SSC TO USE MY AADHAR DATA FOR VERIFICATION PURPOSE.

PRINT TAKEN ON: 30/12/2022 7:53:41 PM

IP ADDRESS: 157.34.116.244